PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

plication or Docket Number

09844047

CLAIMS AS FILED - PART I						S	SMALL ENTITY			OTHER THAN		
TOTAL OLANG			(Column 1)		(Column 2)		7	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			17		,			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			∫		. 6			X\$ 9=		OR	X\$18=	
Ь—	EPENDENT CL	· · · · · · · · · · · · · · · · · · ·	minus 3 =		i &			X40=		ÖR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL	250	OR	TOTAL	
CLAIMS AS AMENDED - PART II								Ó	7	•	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* No	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*CHANGE	Minus	***	T CL AINA	=		X40=		OR	X80=	
175	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
		_	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE						
		(Column 1)		(Colu	mn 2)	(Column 3)	^	וטטוו. רבב ן			ADDII. FEE	
	- C-1	CLAIMS	6 80	HIGH	IEST		Г		ADDI-	۱ ۱		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT			IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	i i	X40=		OR	X80=	
Ľ	FIRST PRESE											
							L	+135=		OR	+270=	
	•							TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- - - - - - - - - -	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	I CLAIM		▎ ├					
	If the entry in colum	mn 1 ie leee than t	he entry in colu	mn 2 writ	e "N" in co	dumn 3	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)						ımn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=		
INE	EPENDENT C	LAIMS	m	inus 3 =	*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If	the difference	e in column 1 is	less than ze	ero, ente	r "0" in c	column 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT ®		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	* 16	Minus	** 2	0			X\$ 9=		OR	X\$18=		
AME	Independent	* 2 ENTATION OF M	Minus		3	=		X42=	c	OR	X84=		
	TINOT PRESE	ENTATION OF W	ULTIPLE DEF	PENDENI	CLAIM			+140=		OR	+280=		
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	nn 2)	(Column 3)					10011.1 22		
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
AME	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		T	+140=		OR	+280=		
							L	TOTAL		L	TOTAL		
		S			7		Al	DDIT. FEE		OR A	DDIT. FEE		
		(Column 1) CLAIMS	a kada ada sa sa	(Colum		(Column 3)	_			_			
AMENDMENT &		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	_	=	Γ	X\$ 9=		OR	X\$18=		
NE I	Independent	*	Minus	***		=	t	X42=	,	ا ہ	X84=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		\vdash			OR		4 3	
. * 16	the entry in oclu-	nn 1 ic loca than th	o ontry in only	mm Omid-	*0" in aal-	ımn 3		+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													